



Santa Clara Fire Department

Office of the Fire Marshal

1675 Lincoln Street, Santa Clara, CA 95050

Phone: 408-615-4970

Fax: 408-241-3006



Request for: (please check one below)

Today's Date: _____

- ☐ Non-Business Hours Permit Inspection
☐ Expedited Plan Review (completed within 7 business days of acceptance)

JOB INFORMATION

Facility Name:

Fire Permit Number:

Project Street Address, Building, Suite or Unit Number:

Requested Inspection Date and Time:

I understand that every attempt will be made to complete the requested expedited plan review or non-business hour inspection. I agree to pay \$769.30 for expedited plan review or non-business hour inspection prior to the inspection or plan review being scheduled. This payment will cover 3 hours of overtime. If the expedited plan review or inspection should take longer than 3 hours, then I will agree to pay for the additional time at a rate of \$256.45 per hour for the actual time worked. Payments can be submitted in person at 1675 Lincoln Street, Santa Clara or by calling (408) 615-4970.

REQUESTING PARTY INFORMATION

Company Name:

Office Phone Number:

Fax Number:

Street Address:

Cell Phone Number:

City, State Zip Code:

E-Mail Address:

Print Name:

Signature:

The following is to be completed by the Office of the Fire Marshal.

Received by:

Date Received:

Assigned To:

Date Assigned:

Inspection Date and Time:

Review Deadline:

Date Minimum Fee Received:

Payment Received:

Received By:

☐ Cash ☐ Check ☐ Credit Card Ref# _____

Actual Time Worked:

Additional Time to be Billed:

Total Fee to be Billed: